

PART B - FEE(S) TRANSMITTAL

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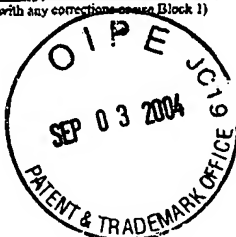
INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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7590

06/04/2004

Rodel Holdings, Inc.
Suite 1300
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| | |
|---------------|--------------------|
| BARBARA WILEY | (Depositor's name) |
| Barbara Wiley | (Signature) |
| 9/3/04 | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/005,268 | 12/04/2001 | Bernard Foster | 000068US | 9916 |

TITLE OF INVENTION: POLISHING PAD INSTALLATION TOOL

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1330 | \$300 | \$1630 | 09/07/2004 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|----------------|----------|----------------|
| SELLS, JAMES D | 1734 | 156-581000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. GERALD K. KITA
2. BLAKE T. BIEDERMAN
3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

ROHM AND HAAS ELECTRONIC
MATERIALS CMP HOLDINGS, INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

WILMINGTON, DE (US)

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

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(Date)

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9-3-04

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09/07/2004 HDEHES2 00000006 500618 10005268

01 FC:1501 1330.00 DA
02 FC:1504 300.00 DA



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial Number: 10/005,268Confirmation Number: 9916Title: POLISHING PAD INSTALLATION TOOLAttorney Docket Number: 000068US

ISSUE FEE TRANSMITTAL LETTER

Via Facsimile 703 746-4000
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Enclosed are the following:

1. X Issue Fee Transmittal (PTOL-85B).
2. X Authorization to charge \$1,630.00 to Deposit Account No. 500618.

9-3-04

Date

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